PATE	ALL VEDE I CVA	O. no persons are	required to respo	nd to a collection of in	normation unl	ess y Gisb	lavs a valid OMB	control numb
PATENT APPLICATION FEE DETERMINATION RECORD Substitute for Form PTO-875						Applic.	706 986	
CLAIMS AS FILED - PART I (Column 1) (Column 2)				SMALL ENTITY		OR	OTHER THAN SMALL ENTITY	
FOR NUMBER F		.EO . 13U	MOER EXTRA	RATE	FEE	7	RATE	FEE
6ASIC FEE (37 CFR 1.16(a))					s	OR	10.11	1
TOTAL CLAIMS (37 CFR 1.16(c))	mlnu	rs 20 =		x s =		OR	V	'
MOEPENDENT CLAIMS (37 CFR 1.16(b))	mlnu	s 3 = ·		X S =	i		x s=	
MULTIPLE DEPENDENT CLAIM PRESENT (D7 CFR 1.16(d))			1		OR	X 5=		
" If the difference in column 1 is loss than zero, enter "0" in column 2.] <u>[+s</u> =		OR	+ 5=	
				TOTAL	L	OR	JATOT	L
art CLAIM	AS AS AMENDE	D - PART II						
	olumn 1)	(Column 2)	(Column 3)	SMALL E	NTITY	OR		R THAN ENTITY
RE AME	CLAIMS MAINING AFTER ENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
Total (37 CFR 1.16(c))	31 Minus	J. 21	- /	x \$=	. 1	OR	x s =	1
Z Independent (37 CFR 1.15(b))	Minus	" 7	-	× \$=		OR	x \$ =	
I FIRST PRESENTATION OF MUITIPLE DEPENDENT OF AN 127 CED 4 18(4)				+s =		OR	+ 5 =	_/_
				TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE	+
(Colo	umo 1)	(Column 2)	(Column 3)		 -		NOUTE [+
CL REM	AIMS AINING TER IDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDI- TIONAL		RATE	ADDI- TIONAL
Z	Minus	"	=	x s_ =	FEE	00	x s =	FEE
∠ Independent ⊥i (37 CFR 1.16(b))	Minus	***	=			OR .		
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))						OR	X \$=	
			TOTAL ADD'L FEE		OR [OR	+ S = TOTAL ADD'L FEE	 	
(Colum	nn 1)	(Column 2)	(Column 3)		' .			
CLA REMA	IMS	HIGHEST	PRESENT			. [
I ACT	ER	NUMBER PREVIOUSLY PAID FOR	EXTRA	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
Total (W CFR 1.16(c)) Independent (W CFR 1.16(b))	. Minus	••	E	x \$=		OR	x \$=	
Independent (37 CFR 1.16(b))	Minus	***	E	x \$ =		OR	x \$ =	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))						OR	+ s =	
				TOTAL ADD'L FEE			TOTAL ADD'L FEE	
* If the entry in column 1 is I "If the "Highest Number Pre "If the "Highest Number Pre	venuely Dald Fad t	4 TI 110 OO 4 OC 1-	1					

The Highest Number Previously Paid For IN THIS SPACE is less than 3, enter '3'.

The Highest Number Previously Paid For '(Total or Independent) is the highest number found in the appropriate box in column 1.

This collection of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS, SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.